PATENT APPLICATION FEE DETERMINATION REC								ORD	1. / -			
Effective December 8, 2004								·	101	5	81898	3.
CLAIMS AS FILED - PART I								SMALL ENT	TITY	OR	OTHER SMALL I	-
<u> </u>	<u>:</u>		(Column 1) (Co			Column 2)	1 1			1		
U.S. NATIONAL STAGE FEES			35					RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150			3E ENT. = \$ 300		BASIC FEE	150	OR	BASIC FEE	
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50/\$100			her situations = 100 / \$ 200		EXAM. FEE	000		EXAM. FEE	
SEARCH FEE			U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400			ther situations = 250 / \$ 500		SEARCH FEE	200		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			. minus 100 =			/ 50 =		X \$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			35 min	us 20 =	• /	5		X \$ 25 =	375	OR	X \$ 50 =	
INDEPENDENT CLAIMS			/ minus 3 = .					X \$ 100 =		OR	X \$ 200 =	
		DENT CLAIM PRE	·	N				+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	805	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A	6/5/06	CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.35	Minus	31	5	- /		X \$ 25 =		OR	X \$ 50 = .	
	Independent	· J	Minus	")	=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
TOTAL ADDIT.										OR	TOTAL ADDIT. FFF	
(Column 1) (Column 2) (Column 3)												
418		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	est Ber Busly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total '	t	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AMENDMENT	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				CLAIM			+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	THE THISTNESS NUM	noer Previously Pata	LOL. (1009) OL 1106	heineur) g	nie uiß	HOST HUNNINGS KNINGS	u 1 U 16	appropriate DOX				Ì